

State of Idaho
DEPARTMENT OF INSURANCE

JAMES E. RISCH
Governor

DIVISION OF STATE FIRE
MARSHAL
700 West State Street, 3rd Floor
P.O. Box 83720
Boise, Idaho 83720-0043
Phone (208)334-4370
FAX # (208)334-4375

SHAD PRIEST
Acting Director

MARK LARSON
State Fire Marshal

Firehouse Software Registration

Department Name: _____ FDID: _____

Department Street Address (required): _____

Department P.O. Box (if applicable): _____

City & Zip: _____

Department Telephone: (____) - _____ FAX: (____) - _____

E-mail _____

Contact Person: _____

Telephone: (____) - _____ home (____) - _____ work

E-mail _____

Fire Department will receive one copy of Version 5.0 FireHouse Software upon completion of this form. The above mentioned fire department agrees to comply with the terms and conditions listed on the Software License Agreement.

The software is accompanied by a maintenance agreement paid for by the Department of Insurance for one year from receipt of software. I understand that continued maintenance agreements will cost the fire department \$105 a year thereafter. It is recommended that fire department continues maintenance agreements as this will assure any and all updates as they occur.

Signature: _____ Date: _____

Name (print): _____

Title: _____